

VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm breath Test Instrument

State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

DataMaster cdm S/N 58427 130292 ✓

(CONTINUED FROM FRONT PAGE)

C

TAPE THE TEST STRIP FROM THE NONDRINKING SUBJECT TEST AND THE DIAGNOSTIC CHECK IN THE MARKED BOXES.

NONDRINKING SUBJECT TEST

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130292

JUNE 18, 2009 ✓

OPERATOR'S NAME:

ACHEE/ANDRE

OPERATOR'S NUMBER: 2385

SUBJECT'S LAST NAME:

TEST

SUBJECT'S FIRST NAME/MI :

SUBJECT

O.L. #: 1234567

DEPT/AGENCY: BET1

CASE/REPORT: XXXXXX

TEST TYPE: T

ALCO TARGET VALUE: .081 ✓

ALCO S/N: 58427 ✓

--- BREATH ANALYSIS ---

.081 ADJUSTED FOR 30.04 in
ALCO TARGET .081 19:40
BLANK TEST .000 19:40
INTERNAL STANDARD VERIFIED 19:41
ALCO TO 30.04 in .083 19:41
BLANK TEST .000 ✓ 19:42
SUBJECT SAMPLE .000 19:42
BLANK TEST .000 ✓ 19:43
ALCO TO 30.04 in .083 ✓ 19:43
BLANK TEST .000 19:44

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130292

JUNE 18, 2009 ✓
TIME 19:34

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY
PROGRAM: OKAY
SOFTWARE DATE: 01/08/09
HEATERS
SAMPLE CHAMBER: 49c
BREATH TUBE: 43c
BAROMETER: 30.04 in
FLOW DETECTOR: OKAY
PUMP
HIGH SPEED: OKAY
DETECTOR: OKAY
FILTERS: OKAY
QUARTZ STANDARD: OKAY
CALIBRATION: OKAY

PRINTER TEST

"#5%(')*+,-./0123456789:;<=>?@ABCDEF6
HIJKLMNOPQRSTUVWXYZ[\]^_`abcdefgijklmno
pqrstuvwxyz{|}~!"

VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm Breath Test Instrument

State of Alaska

JUL 20 2009

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Supervisor/Operator Performing the Verification Procedure:		DataMaster cdm S/N <u>130292</u>
Name <u>ANDRE ACHEE</u>		ID# <u>2385</u> Date <u>6/18/2009</u>
A	Agency <u>BETHEL POLICE DEPT</u>	Phone # <u>907-543-3781</u>
Instrument Location <u>BETHEL P.D.</u> ✓		
Alco S/N <u>58427</u> ✓ Target Value <u>.081</u> ✓ High Pressure <u>500 PSI</u>		
B	Alco Test Values <u>.083</u> ✓ <u>.083</u> ✓ 1 st Alco 2 nd Alco	
Signature <u>[Signature]</u> ✓		<u>088</u> <u>7/24/09</u>
(OVER)		

(Do Not write in the area below)

I, Nita J. Bolz, after being first duly sworn, depose and state as follows:

- (1) I am a Forensic Scientist IV at the State of Alaska Scientific Crime Detection Laboratory.
- (2) The Alaska Scientific Crime Detection Laboratory is an entity within the Department of Public Safety.
- (3) I am the Scientific Director of the State Breath Alcohol Program.
- (4) In that capacity, I am responsible for overseeing the breath alcohol program, including assuring that persons responsible for verifying the calibration of instruments are properly trained and qualified. I also am responsible for maintaining the records of the program.
- (5) The attached verification is a true and accurate verification of calibration that reflects a regularly conducted and regularly recorded activity of the breath alcohol program performed by a person trained and qualified to conduct the verification.
- (6) The referenced instrument is certified for evidentiary use in the State of Alaska.

Nita J. Bolz
Nita J. Bolz
Scientific Director
State Breath Alcohol Program

Subscribed and sworn before me this 7th day of Aug, 2009.

[Signature]
Carolyn M. Noland
Notary Public, State of Alaska
Commission Expires with Office

